

## **Minutes of NER-RAC-HLS**

### **Working Meeting - October 28, 2005**

#### **Attendees:**

**Anne** Fladger – Brigham & Women's Hospital / 617-732-5684 / [afladger@partners.org](mailto:afladger@partners.org)  
**Barbara** Davis – Newport Hospital / 401-845-1311 / [bdavis@lifespan.org](mailto:bdavis@lifespan.org)  
**Claire** LaForce – Rutland Regional Medical Center / 802-747-3777 / [claforce@rrmc.org](mailto:claforce@rrmc.org)  
**Denise** Corless – Caritas Norwood / 781-278-6243 / [dcorless@cchcs.org](mailto:dcorless@cchcs.org)  
**Emily** Scribner – Franklin Memorial Hospital / 207-779-2554 / [escribner@fchn.org](mailto:escribner@fchn.org)  
**Margo** Coletti – Beth Israel Deaconess Medical Center / 617-632-8480 / [mcoletti@bidmc.harvard.edu](mailto:mcoletti@bidmc.harvard.edu)  
**Mark** Goldstein – NN/LM NER / 508-856-5964 / [mark.goldstein@umassmed.edu](mailto:mark.goldstein@umassmed.edu)  
**Mimi** Guessferd – Parkland Medical Center / 603- 421-2318 / [Mary.Guessferd@HCAhealthcare.com](mailto:Mary.Guessferd@HCAhealthcare.com)  
**Shirley** Gronholm – Harford Hospital / 860-545-2420 / [sgronho@harthosp.org](mailto:sgronho@harthosp.org)  
**Sheila** Hayes – Portsmouth Regional Hospital / 603-433-4094 / [Sheila.hayes@HCAhealthcare.com](mailto:Sheila.hayes@HCAhealthcare.com)

#### **Opening Remarks:**

- Meeting began with Mark going over the agenda and ground rules for the day.
- To ensure consistency with the language found in the NN/LM NER contract with NLM, the group will now be referred to as the Hospital Library Subcommittee (HLS) of the Regional Advisory Committee (RAC) for the New England Region (NER). In principle, the Subcommittee will continue to operate more like a task force.
- Barbara was recorder for the meeting minutes, while Anne was recorder for the flip-charts.
- Meeting packets for participants included the following documents:
  - a.) Meeting agenda
  - b.) Revised member contact list
  - c.) Working draft for Hospital Librarian Orientation Packet
  - d.) Working draft for Hospital Library Intervention Toolkit
  - e.) Working draft for Hospital Library Marketing Plan
- The Subcommittee continued to follow up on the development of 3 interrelated projects that were considered in previous meetings:
  1. **Hospital Librarian Orientation Packet**
  2. **Hospital Library Invention Toolkit**
  3. **Hospital Library Marketing Plan**
- It is possible that at a later date the Subcommittee will want to publish the results of its work.
- All projects must be completed by April 30, 2006, the end of NER's five-year contract.
- The group will share visions, discuss topics, and set timelines for completion of all projects.

## **HOSPITAL LIBRARIAN ORIENTATION PACKET**

### **OBSERVATIONS**

- The purpose of the packet will be to orient new librarians to resources in the region and to orient them to hospital library operations.
- Does MLA already have a library orientation packet?
- Is this packet meant to orient librarians first, to be followed up with continual mentoring?
- The NER could maintain a list of phone numbers of librarians willing to serve as mentors.
- Shirley suggested that maybe this would not be “mentoring” as MLA described it.
- Emily explained that in Maine mentoring is done informally.
- Anne saw all three projects as a single, modularized kit.
- Mark discussed the body of library knowledge as “professional-ism”.
- The idea of a job board for hospital librarians was discussed. This might help in filling new positions. Perhaps this job board might be hosted on the NER site. The concept of a job board was tabled for later discussion.
- It was suggested that a letter be sent to the new librarian’s hospital administrator to let them know that there are hospital library standards and a support system for their librarian.
- Is there a way to ensure continuity between the time librarians leave an institution and when someone else is hired?
- Could the exiting hospital librarian directly contact the NER so that some action could be initiated regarding the hiring of a replacement?

### **GOALS**

1. To assist and support the new hospital librarian.
2. To improve the professional standing of the librarian within their institution.
3. To improve the professional performance of hospital librarians within New England.

### **OBJECTIVES**

- A. Introduce new librarians to professional librarianship in the region by providing appropriate resources for their use.
- B. Educate new librarians about current MLA-HSL Standards for Hospital Libraries.
- C. Apply uniform practices for hospital librarians throughout the region by encouraging participation in state and regional library groups, and by assisting hospital administration in supporting library professionalism through marketing efforts.

## STATEMENT OF WORK

- ❖ An orientation packet will be sent to individuals who have accepted positions as a hospital librarian in the New England region.
- ❖ Packet contents will be reviewed on an annual basis by members of the Subcommittee.
- ❖ Distribution and maintenance will be performed by the NER.

Additional discussion:

- The NER would be responsible for collating and distributing orientation packets.
- Presidents of state groups will be responsible for providing state/local content material for the Orientation packet, which might include: a local contact list, along with an introductory letter from the state organization.
- A cover letter for the packet could come from Elaine Martin as NER Director.
- The contents of the packet would be subject to annual review by members of the Subcommittee.

## DELIVERABLES (PACKET CONTENTS)

DELIVERABLES	LEAD
Welcome Letter	Mark
MLA-HSL Standards	Denise
Introductory Letters from state/local groups	Group Presidents
Training Opportunities	Margo
Introductory sheet from the NER/ NER	Mark
List of Acronyms (e.g. JCAHO)	Sheila
List of Listservs	Penny, Mark
Bibliography of key texts/sources for hospital libraries	Shirley
Important phone numbers	Mark, Local Groups
Local contacts list	Local Groups
FAQ's for NLM Products	NER, Mark

[NOTE:  
Subcommittee  
members will inform  
their respective state  
groups to provide  
introductory letters  
to be inserted into  
orientation packets.]

## **HOSPITAL LIBRARIAN INTERVENTION TOOLKIT**

### **OBSERVATIONS**

- Mark reviewed the proposed 3-tiered intervention model included in the Working Draft handout.
- The NER should rely on assistance from the state groups in identifying potential closing of facilities. Mark commented that a regional alert mechanism is needed for the NER.
- Are there statistics on how many hospital libraries have closed? Mark noted that the July 2004 "ILL Advised" column of the *NER'estah* (NER's newsletter) has a list of library closings for the region.
- There seems to be a trend for smaller libraries to contract with the larger ones to provide services. There's a growing perception that it's cheaper to contract out services rather than maintain a librarian position in-house. This is not an ideal situation.
- The group discussed the possibility of defining a fourth tier of intervention for special situations.
- Denise asked what happens to the collection of a library that is closing. The group discussed what happened in specific cases where another library came to assess and take important titles to preserve an electronic print repository.
- What happens to unique titles when a library closes? In some cases, another library gets them so that they are still available within the state. Mimi asked whether it was possible to give journal collections to another library, given copyright law.
- It was determined that intervention is needed when the institution retains the library function, but removes all staffing.
- Someone asked Mark about the recent transition at Brattleboro Memorial Hospital (BMH) in VT. Mark outlined the actions he took at BMH, which included several phone calls with the retiring librarian (Marty Fenn) and a hospital administrator. While in this instance, the time was ripe for intervention, there is very little that can be done to overturn the eventual loss of the library function, once it has been removed from the hospital budget as a line item.
- The group discussed the strategy of encouraging hospitals to include the CME coordinator role with the hospital librarian role. Anne noted that there are only 7-8 librarians in MAHSLIN who serve as CME coordinators.
- If library education is very strong, administrators will see something coming out of the library to support it. Hospital librarianship has failed at getting out and circulating around, exposing itself to the hospital leadership.
- Margo commented that there might be an area in the toolkit that stated, "Many librarians are active in X, Y, and Z committees."
- Tier 3 of the Intervention Model was modified to indicate the following:
  - Administrative Response - "The library remains open but there is no trained librarian or other personnel, or the library is absorbed by a larger entity."
  - Expected Outcome - "NER works with state HSL group to acquire/redistribute material for print repository or special collections."
- Mark will distribute by e-mail the amended 3-Tiered Intervention Model.

## GOALS

1. To maintain, improve, and promote library services and staffing in existing medical institutions.

## OBJECTIVES

- A. Identify, in a timely manner, institutions that are at risk at downsizing or closing.
- B. Minimize hospital library closures or downsizings.
- C. Establish alert mechanism for the NER to intervene.

## STATEMENT OF WORK

- ❖ Create and develop a library intervention toolkit for the NER, which establishes a process through which each individual situation is assessed and appropriate level of intervention determined.
- ❖ Toolkit contents will be reviewed on an annual basis by members of the Subcommittee.
- ❖ Distribution and maintenance will be performed by NER/ NER.

## DELIVERABLES (PACKET CONTENTS)

DELIVERABLES	LEAD	NOTES
Letter of Support to Hospital Administrator	Anne Mark	Revise draft copy used in Medical Librarian's Month letter campaign.
Letter of Regret to Hospital Administrator	Mark Anne	Revise draft copy used in Medical Librarian's Month letter campaign.
Copy of article: <i>"The value and impact of information provided through library services for patient care: a systematic review"</i> by Weightman, A.L., et al.	Mark	
List of library values	Sheila	Sheila will create list of bullets. Possible entries: cost savings; quality; ROI; safety/risk, etc.
Policies & Procedures Manual for NER	Anne Mark	Anne will provide MAHSLIN's P+P Manual as template.  Include: letters, phone calls, visits, or other appropriate follow-ups.  Key people: Chair of Library Cmte.; Chair of Education Cmte.; other advocates, etc.

### **Additional Comments**

- Is there a time at which the CME Committee or other key stakeholders could be contacted (for example: nurse clinical educators, quality improvement staff, or other advocates?) It may be necessary to identify key people in an institution that is in trouble.
- Is it possible that the NAHSL Rep for each state could take on responsibility for starting this process? The possibility was discussed.
- It was decided by consensus that members of the Subcommittee will inform the NER if there are hospitals at risk in their states.
- Anne will provide the MAHSLIN Policies and Procedures Manual as a template.

## **HOSPITAL LIBRARY MARKETING PLAN**

### **Observations**

- The newsletter, *Marketing Library Services*, was passed around the table. Copies for one of the articles were also distributed.
- All institutions have mission statements, and all libraries have mission statements that support them. Could libraries capitalize on the points that are itemized in the hospital's mission statement?
- Perhaps this plan could include some sort of hospital library promotion item provided by the NER.
- Would it be a good idea to put together a sample of a hospital library marketing plan?
- There was general discussion about collecting statistics to assess areas where marketing might be needed.
- Anne collects statistics on ILL (borrow/loan), copying (print/electronic), teaching sessions, number of searches (complex searching requires keeping track of time spent.) Anne also produces an annual report and includes statistics.
- Denise tracks the kind of questions she is asked, groups them by broad category, and uses the numbers to support library services and justify budget requests.
- Sheila thought it was a good idea to create a 2-page toolkit that would:
  - Define the job
  - List what you want to tell patrons
  - Include a checklist of categories of things you do, as well as what needs to be quantified/qualified.
- Is the Subcommittee duplicating past efforts of the MLA?
- It is important to draft a list of potential items to focus on to grow services under the library function.
- The possibility of two checklists was discussed: one checklist would include how to get more people to use library services; the other checklist would include how to measure the value of library services.

### **GOAL**

1. To assist hospital libraries in marketing their services and promoting themselves within their institutions.

### **OBJECTIVES**

- A. Create checklist to expand usage of library services.
- B. Create checklist to measure value and worth of library services.

## STATEMENT OF WORK

- ❖ Create a sample hospital library marketing plan.
- ❖ Incorporate and integrate national, regional, and local marketing plans.

## DELIVERABLES (PLAN CONTENTS)

DELIVERABLES	LEAD	NOTES
Checklist to expand services	Sheila	
Checklist to measure value	Anne	
Sample Job Description	Anne	
Sample Marketing Plan	Barbara	Will query MEDLIB-L.
Sample Assessment	Mark	SWOT (Strengths, Weaknesses, Opportunities, Threats) Situational Analysis
Sample Letter to Administrator	Mark	Regarding the value of the librarian within the institution.



## **ACTION TIMELINE FOR ALL PROJECTS**

<b>PACKET</b>	<b>COMPLETION DATE</b>	<b>BETA TEST DATE</b>
Orientation Packet	December 31, 2005	January – February, 2006
Intervention Toolkit	January 31, 2006	March – April, 2006
Marketing Plan	April 1, 2006	Begin work no later than March 1, 2006

### **Additional Comments**

- Publish the results of all projects once completed.
- The Marketing Plan may have to be tweaked depending on how the first two projects are received.
- An evaluation tool will be needed, especially for the Orientation Packet. Survey Monkey was suggested, but limitations were also cited. May find simple online interactive forms the best for post-analysis and reporting.
- Margo will create an Orientation Packet Evaluation Survey to be completed in January - February 2006.
- It was suggested that librarians who are in jobs less than six months (longer in some libraries) be asked to participate as beta testers.
- It was suggested that there be at least two beta testers in each state.
- Mark will develop a list of names for potential beta testers.
- Margo questioned whether it was important that the librarian was/was not a professional. She thought that the proposed Orientation packet and Intervention kit might send hospital administrators conflicting messages. Mark explained that for some, there may be the appearance of a "mixed message"; however, if we continue to develop and implement projects such as those we have discussed today, we may one day see hospital administrators adopt the staffing of hospital libraries with professionals as good business sense. The last thing we need is to foster a perception that persons currently filling library positions go unsupported.

### **PARKING LOT (flip chart)**

- Has MLA already prepared something for new librarians in the way of orientation?
- Should we formally establish a regional mentoring program?
- Should we establish a Hospital Librarian Jobline via the NER web site?

### **MEMBERSHIP DRIVE 2006**

- In 2006, Mark will be polling the NER membership (500+ libraries) to update the NER membership database. Suggestions were solicited for additional data collection.
- In addition to contact and service log data , the following data fields will be considered for possible data collection from hospital libraries:
  - Internet connectivity
  - Electronic Document Delivery (Ariel, etc.)
  - Staff (MLS/Non-MLS; FT or PT)
  - Staff hours of operation
  - Library hours open per week
  - Number of employees in the hospital
  - Teaching or non-teaching hospital
  - Direct reporting structure
  - Bed size
- Margo and Anne will check the AHA Directory for the names of hospitals in the region.
- Suggestions were made to minimize data collection efforts via the phone by sending out requests for information via the MEDLIB-L, with follow-up phone calls to non-responders.

**FINIS**